

## **General Contractor Registration Application**

**Instructions to applicants:** Complete form by filling in all information below and submit the following:

- 1. Complete Contractor Registration Application.
- 2. Copy of \$20,000 Contractor or License & Permit Bond.
- 3. Payment of \$75.00 for annual renewal (cash, card, or check payable to City of Effingham.)
- 4. Certificate of Insurance showing Liability and Worker's Compensation Insurance.
- 5. Certificate of Additional Insured-Designated Person or Organization naming the City of Effingham.

Business Name:	Application Date:
Business Address:	Phone No.:
City, State, & Zip Code:	Mobile No.:
Email:	

Mail or Email Information to:		<b>Drop off at City Hall</b>
City of Effingham		201 E. Jefferson Ave.
ATTN: Building Official	Or	The Building Official Office
P.O. Box 648, Effingham, IL 62401		
Email: jbudde@effinghamil.com		

\*Reminder: All contractors must renew Certificate of Registration annually. Certificate of Registration expires the date the License & Permit Bond or Contractors Bond expires.

Contractor Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

If you have any questions, please contact: Office of the City of Effingham Building Official 201 E. Jefferson Ave., P.O. Box 648 Effingham, IL 62401 Phone #: (217) 342-5300 x 3 E-mail: jbudde@effinghamil.com

## THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

## ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

## SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s):

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

- A. Section II Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:
  - 1. In the performance of your ongoing operations; or
  - **2.** In connection with your premises owned by or rented to you.

However:

- 1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
- 2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

**B.** With respect to the insurance afforded to these additional insureds, the following is added to **Section III – Limits Of Insurance:** 

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

- 1. Required by the contract or agreement; or
- **2.** Available under the applicable Limits of Insurance shown in the Declarations;

whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.